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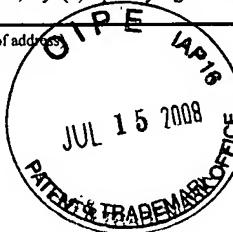
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Jon M. Dickinson

(Depositor's name)

July 15, 2008

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/764,321	01/23/2004	Ching-Wei Chang	J-SLA.1397	8179

TITLE OF INVENTION: VECTOR ERROR DIFFUSION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	08/04/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
LEE, TOMMY D	2625	358-003030

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 <u>David C. Ripma</u> 2 <u>Jon M. Dickinson</u> 3 <u>Robert D. Varitz</u>
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Sharp Laboratories of
 America, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Camas, WA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Authorized Signature Jon M. Dickinson

Date July 15, 2008

Typed or printed name Jon M. Dickinson

Registration No. 22820

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